

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 1 OF 2
FOR SE OF FORM 24/48

| | | | |
|--|--|---|--|
| NAME OF COMMITTEE (In Full) Coalition of Americans for Political Equality | | FEC IDENTIFICATION NUMBER ▼ C C00493486 | |
| Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on | | MM / DD / YYYY | |

| | | | | |
|--|--------------------|------------------------------|---|--|
| Full Name (Last, First, Middle Initial) of Payee Google TV | | | Date MM / DD / YYYY 07 / 31 / 2012 | |
| Mailing Address 901 Cherry Avenue | | | Amount 12507.81 | |
| City San Bruno | State CA | Zip Code 94066 | Transaction ID : CAPESEF28D7564AE8F91 | |
| Purpose of Expenditure Video Broadcast | | Category/ Type 004 | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____ | |
| Name of Federal Candidate Supported or Opposed by Expenditure: Mitt Romney | | | Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | |
| Calendar Year-To-Date Per Election for Office Sought 12507.81 | | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____ | |

| | | | | |
|--|--------------------|------------------------------|---|--|
| Full Name (Last, First, Middle Initial) of Payee Google TV | | | Date MM / DD / YYYY 08 / 31 / 2012 | |
| Mailing Address 901 Cherry Avenue | | | Amount 8688.43 | |
| City San Bruno | State CA | Zip Code 94066 | Transaction ID : CAPESE5592E9BB31CC51 | |
| Purpose of Expenditure Video Broadcast | | Category/ Type 004 | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____ | |
| Name of Federal Candidate Supported or Opposed by Expenditure: Mitt Romney | | | Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | |
| Calendar Year-To-Date Per Election for Office Sought 21196.24 | | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____ | |

| | |
|---|-----------------|
| (a) SUBTOTAL of Itemized Independent Expenditures..... | 21196.24 |
| (b) SUBTOTAL of Unitemized Independent Expenditures | |
| (c) TOTAL Independent Expenditures..... | |

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Margaret Berardinelli

[Electronically Filed]

Date

MM / DD / YYYY
03 / 20 / 2013

Signature

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 2 OF 2
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

Coalition of Americans for Political Equality

FEC IDENTIFICATION NUMBER ▼

C C00493486

Check If ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on

MM / DD / YYYY

Full Name (Last, First, Middle Initial) of Payee

Google TV

Date

MM / DD / YYYY

Mailing Address 901 Cherry Avenue

Amount

1850.00

City

San Bruno

State

CA

Zip Code

94066

Transaction ID : CAPESE6F84B674A12D04

Purpose of Expenditure
Video BroadcastCategory/
Type

004

Office Sought:

☐ House

State:

☐ Senate

District:

☒ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Mitt Romney

Calendar Year-To-Date Per Election
for Office Sought

23046.24

Disbursement For: ☐ Primary☒ General☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

Date

MM / DD / YYYY

Mailing Address

Amount

City

State

Zip Code

Purpose of Expenditure

Category/
Type

Office Sought:

☐ House

State:

☐ Senate

District:

☐ President

Check One:

☐ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Calendar Year-To-Date Per Election
for Office SoughtDisbursement For: ☐ Primary☐ General☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

1850.00

(b) SUBTOTAL of Unitemized Independent Expenditures▶

(c) TOTAL Independent Expenditures.....▶

23046.24

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Margaret Berardinelli

[Electronically Filed]

Date

MM / DD / YYYY

Signature